

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | TG | | 4/18 |
| O.I.P.E. CLASSIFIER | | 49 | 5/10/01 |
| FORMALITY REVIEW | SL | 1021 | 06/07/01 |
| RESPONSE FORMALITY REVIEW | XG | 1091 | 9-21-01 |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | | | 6-28-02 |
| 2 | | | 8-15-02 |
| 3 | | | 10-11-02 |
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If more than 150 claims or 10 actions
staple additional sheet here

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JC-X 17
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